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## BIB DATA SHEET

CONFIRMATION NO. 8344

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/955,367	09/18/2001	435	1634	960296.97478
<b>RULE</b>				
<b>APPLICANTS</b> Alan D. Attie, Madison, WI; Samuel T. Nadler, Madison, WI;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/233,339 09/18/2000				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 11/19/2001				
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /DIANA B JOHANSEN/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance  Initials	<b>STATE OR COUNTRY</b> WI	<b>SHEETS DRAWINGS</b> 0	<b>TOTAL CLAIMS</b> 11
<b>INDEPENDENT CLAIMS</b> 9				
<b>ADDRESS</b> Nicholas J. Seay Quarles & Brady LLP 1 South Pinckney Street P.O. Box 2113 Madison, WI 53701-2113 UNITED STATES				
<b>TITLE</b> Methods of diagnosing susceptibility to obesity.				
<b>FILING FEE RECEIVED</b> 1855	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	